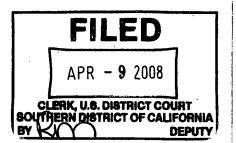
EDWARD G. ARBERRY	
PLAINTIFF/PETITIONER/MOVANT'S NAME E-77487, 14-D6-L	FILING FEE PAID
PRISON NUMBER California State Prison/Solano, P.O.BOX 4000	HP MOTION FILED
PLACE OF CONFINEMENT	COPIES SENT TO
Vacaville, California 95696-4000 ADDRESS	Court_ProSe



## United States District Court Southern District Of California

(TO BE FILLED IN BY U.S. DISTRICT COURT CLERK)
,
MOTION AND DECLARATION UNDER
PENALTY OF PERJURY IN SUPPORT OF MOTION TO PROCEED IN FORMA
<u>PAUPERIS</u>
•
further declare I am unable to pay the fees of this at I believe I am entitled to redress.  lowing question under penalty of perjury: "No" go to question 2)
ifornia State Prison Solano
☐ Yes ☐ No
□Yes □No
this affidavit and attach a certified copy of the trust

				· · · · · · · · · · · · · · · · · · ·	
		•			
date of your last e	mployment	, the amount	of your take-h	ome salary	y or wages
·	,				
erest or dividends surance insation other welfare	☐ Yes	□ No	ily hygiene ne amount rece	support	what you
bank(s): <u>N/A</u>					
noney market/CDS	S' separate f	rom checkin	g accounts?	□ Yes 5	⊋ No
bank(s): N/A		<del></del>	<del></del>		
s):N/A					
	you received any many self-employment.  erest or dividends surance is "Yes" described eive each month.  pount(s)?  Yes bank(s): N/A  money market/CDS bank(s): N/A  money market/CDS bank(s): N/A  money market/CDS bank(s): N/A	date of your last employment daddress of your last employers daddress of your last employers daddress of your last employers described any money from the seriest or dividends the surance the yes the seriest or dividends to yes the yes the yes the yes the yes the seriest described each source development. It was a seriest date of your last employers the yes	date of your last employment, the amount daddress of your last employerNota  you received any money from any of the form self-employmentYesNo	date of your last employment, the amount of your take-held address of your last employer. Not applicable.  you received any money from any of the following source rest or dividends	date of your last employment, the amount of your take-home salary daddress of your last employer. Not applicable.  you received any money from any of the following sources?: reself-employment.

	- T.	, bonds, securities, other financial instruments, or other valuable property?
	☐ Yes ★☐ No N/A  If "Yes" describe the property and a	state its value. Not applicable
•	ir res desertee the property and	state its value. Not applicable
-		
8. ]	List the persons who are dependent	on you for support, state your relationship to each person and indicate how
. 1	much you contribute to their suppor	rt. N/A
-		
9. 1	List any other debts (current obliga Not applicable.	tions, indicating amounts owed and to whom they are payable):
•	11 11	
,-	11	
	savings certificates, notes, jewelry	alue (specify real estate, gifts, trusts inheritances, government bonds, stocks, y, artwork, or any other assets [include any items of value held in someone able.
12.		a #3 "No," and have not indicated any other assets or sources of income explain the sources of funds for your day-to-day expenses
	I support myself through	h the institution's pay position, and family support
	from time to time.	
I de fals	clare under penalty of perjury the estatement herein may result in	nat the above information is true and correct and understand that a the dismissal of my claims.
	4-8-08	EDWARD G. ARBERRY Edward aclassey
	DATE	SIGNATURE OF APPLICANT

If you are a **prisoner** you <u>must</u> have an officer from your institution provide this official certificate as to the amount of money in your prison account. <u>There are no exceptions to this requirement.</u>

## PRISON CERTIFICATE

 $(Incarcerated\ applicants\ only)$ 

(To be completed by the institution of incarceration)

I certify that the applicant	EDWARD G. A	RBERRY
, II <u></u>	(NAME	OF INMATE)
	E-77487	
	(INMATE'S	CDC Number)
has the sum of \$	on ac	ecount to his/her credit at
	(Name oi	FINSTITUTION)
I further certify that the applica	ant has the following	securities
to his/her credit according to the	ne records of the afor	ementioned institution. I further certify that <b>during</b>
		ly balance was \$
the past six months the applic	am s average monin	iy balance was \$
and the average monthly depo	sits to the applicant's	account was \$
		RTIFIED COPY OF THEIR TRUST ACCOUNT
		TIONS FOR THE SIX-MONTH PERIOD
IMMEDIATELY PRECEDI	NG THE FILING OF	THE COMPLAINT PER 28 U.S.C. § 1915(a)(2).
	•	
		•
DATE		SIGNATURE OF AUTHORIZED OFFICER OF INSTITUTION
	•	
		•
		Officer's Full Name (Printed)
		Officer's Full Name (Printed)
		Officer's Full Name (Printed)

## TRUST ACCOUNT WITHDRAWAL AUTHORIZATION (Incarcerated applicants only)

(This form MUST be completed by the <u>prisoner</u> requesting to proceed <u>in forma pauperis</u>. An incomplete "Trust Account Withdrawal Authorization Form," or "Prison Certificate" will result in automatic denial of the prisoner's request to proceed <u>in forma pauperis</u>.)

I, Edward G. Arberry, request and authorize the agency holding me in (Name of Prisoner/ CDC No.)

custody to prepare for the Clerk of the United States District Court for the Southern District of California, a certified copy of the statement for the past six months of my trust fund account (or institutional equivalent) activity at the institution where I am incarcerated.

I further request and authorize the agency holding me in custody to calculate and disburse funds from my trust fund account (or institutional equivalent) pursuant to any future orders issued by the Court relating to this civil action pursuant to the Prison Litigation Reform Act of 1995, Pub. L. No. 104-134, Title VIII, §§ 801-10, 110 Stat. 1321 (1996).

This authorization is furnished in connection with a civil action filed in the Southern District of California, and I understand that, pursuant to 28 U.S.C. §§ 1914 and 1915(b)(1), the total amount of filing fees for which I am obligated is either  $\square$  \$250 (civil complaint) or  $\square$  \$5 (habeas corpus petition) (check one). I also understand that this fee will be debited from my account regardless of the outcome of this action. This authorization shall apply to any other agency into whose custody I may be transferred.

H-8-08
Edward G. Arberry Edward Culumy

Date
SIGNATURE OF PRISONER

-5-